

State of South Dakota

Candidate's or Committee's Report of Receipts and Expenditures RECEIVED

SEP 2 2 2004

Candidates and candidate committees: File in the office we PACs, political party, ballot question and other committees	where you filed your nominating petition. s: File with Elections Department, Secretary of State's Office, 500 E Capitol Ave., Pierre, SD 57501-5070
See pages 9 & 10 of the Guideline Book for	specific instructions on completing this report.
Name of Candidate or Committee Fr	iends of Dusty Johnson
Complete Mailing Address 1512 Au	igusta Ave, Mitchell, SD, 57301
Name of Person Making Report Caro	Seber + Daytime Phone Number (w05) 996-8287
If you are a candidate, what office are you s	eeking?
If you are a ballot question committee, indic reporting period and whether the measure w	cate which measure(s) the committee was involved with during the ras supported or opposed.
	ne Book) Pre - general and termination 2 5 of Guideline Book) October 23, 2004
Tor Reporting 1 cross Ending (See pages 4 8	and the state of t
The following verification must be complete	ted before submitting report.
VERIFICATION OF PERSON MAKING F	REPORT
I <u>Carol Sebert</u> this report and to the best of my knowledge	(print name legibly), certify that I have examined and belief it is true, correct and complete.
Date: 9-20-04	laral beherd
	Candidate Signature or Signature of Committee Treasurer or Chairperson
P : 111 2001	

Revised July 2001

Filed this 214 day

SECRETARY OF STATE

Name of Candidate or Committee Friends of Dusty Johnson For the reporting period ending October 23, 2004

Schedule A - Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Unitemized Contributions from Individuals:			*\$ <u>500</u>		
Itemized Contributions from In	ndividuals	Place of Employment			
Name	Residence Address	(Name of Employer)			
			\$		
			\$		
			\$		
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			\$ 		
	Total of Itamiza	d Contributions from Individuals			

Appendix	\mathbf{R}
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Name of Candidate or Committee Fri	ends of Dusty Johnson	<u>. </u>	Appendix B
For the reporting period ending Octob	er 23, 2004		
Schedule A – I	Direct Contributions (continued)		
Unitemized Contributions from Political Parties:		*\$_	50
Itemized Contributions from Political Parties			
Party Name	Address		
		\$_	
		_	
		-	
		_	
	<u> </u>	\$ _	
To	otal of Itemized Contributions from Political Parties:	*\$ _	0
	mittees (PAC's) - All contributions from PAC's must b	e itemi	zed.
PAC Name	Address	\$	
		\$ _	
		\$_	
		\$_	
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Total of Itemiz	ed Contributions from Political Action Committees:	*\$ _	0
Total of	All Direct Contributions (Sum of all lines with an *)	\$	550

Name of Candidate or Committee: Friends of Dusty Johnson
For the reporting period ending: October 23, 2004

Schedule E - Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Expenses		Contributions Made to Candidates and Committees			
Item	Amount	Name of Candidate or Committee	Amount_		
Advertising	550				
Consulting					
Postage					
Printing	·				
Rent					
Salaries					
Telephone					
Travel					
Utilities					
	I ist other owners				
List other expense items below	List other expense amounts below				
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Total Expenditures: \$ 550

Name of Candidate or Committee: Friends of Dusty Johnson
For the reporting period ending: October 23,2004

Schedule F - Debts and Obligations

This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

Owed to:	Purpose:	Amount
	77.7	
	Total Obligations:	s 0

;	Na	ame of Candidate or Committee: F	riends of	Dusty	Johnson	Appendi
		or the reporting period ending: Octo		04 '		
		is summary sheet will give a brief outline of all ca m the schedules previously completed.	Summary Pa		porting period. Please	e transfer all totals
	1.	Amount on hand, if any, at the beginning	ng of the reporting	period:	\$	
	2.	Receipts				
		Schedule A - Direct Contributions	\$ <u>550</u>			
		Schedule B - Fund-Raising Events	\$ <u> </u>	_		
		Schedule C - In Kind Contributions	\$ <u> </u>	_		
		Schedule D - Other Income	\$ <u> </u>	_		
		Total of all Receipts	\$ <u>550</u>	_		
	3.	Total Monetary Receipts (A+B+D)			\$_	550
	4.	Candidate's Personal Contribution to O	wn Campaign		\$	0
	5.	Monetary Loans to Candidate or Comm	nittee During Repor	ting Period	\$	0
	6.	Monetary Loans Repaid During Report	ing Period		\$_	0
	7.	Expenditures - Schedule E			\$_	55 o
	8.	Unpaid Obligations - Schedule F	\$ <u> </u>	_		
	9.	Amount on hand at the close of this rep This should equal lines (1+3+4+5) – (6-	~ .		\$	\mathcal{O}

	Friends of Dusty Johnso	<u>n</u>
For the reporting period ending:	October 23, 2004	
List on this schedule fund-raising events held	le B - Fund-Raising Events Proceeds to raise money for the candidate and the net proceeds derived tribution results in their aggregate being more than \$100 in the	from each event. If
Type or Name of Event		Net Proceeds
		e ^
	Total:	\$ <u>0</u>
	edule C - In Kind Contributions services and the estimated fair market value. If the value exceeds of employment must be reported.	eeds \$100, the name
	Name, Residence Address &	
Nature of Non-Cash Contribution	Place of Employment	Estimated Value
		<u> </u>
		
	Total:	\$ <u>0</u>
Use this schedule to report any refunds, intere	Schedule D - Other Income st earned or other income which is not a direct contribution.	
Source of Income		Amount
	, <u>,,,,</u>	
		,
	Total:	\$ 0